



# LakeCounty

Central Permit Facility  
500 W. Winchester Road Unit #101  
Libertyville, IL 60048-1331  
PHONE: (847) 377-2600  
FAX: (847) 984-5854  
EMAIL: [lcpermits@lakecountyil.gov](mailto:lcpermits@lakecountyil.gov)

## Registration Form - Residential Residing

You may complete this registration form (in lieu of applying for a permit) when proposed improvements consist of **only** residing your residential structure. A permit shall be required if residing is part of: 1) a larger project that involves interior alterations or additions, 2) a commercial project, or 3) property has red tag.

This process is designed to maximize customer convenience. However, the customer always has the right to seek a permit and a follow-up inspection. Lake County reserves the right to inspect any improvement performed whether permitted or registered.

Please complete the information below, sign and send this form to the Central Permit Facility, Attention: CEP Staff, at the above address along with a check for \$30, payable to the "Lake County Treasurer" as a non-refundable registration fee. **UPON SUBMISSION AND REVIEW OF THIS FORM, YOUR PROJECT WILL BE REGISTERED. CONSTRUCTION CANNOT BEGIN UNTIL YOU RECEIVE CONFIRMATION FROM THIS OFFICE THAT YOUR REGISTRATION IS COMPLETE. NOTE: By signing below you agree to comply with the requirements of the Solid Waste Hauling and Recycling Ordinance by diverting 75% of construction and demolition debris generated by this project.**

(Please complete the information below and sign)

PIN: \_\_\_\_\_ Address of Property: \_\_\_\_\_

\_\_\_\_\_

Owner Address (if different from above): \_\_\_\_\_

Owner Name: \_\_\_\_\_ Owner Phone Number: \_\_\_\_\_

Owner Fax Number: \_\_\_\_\_ Email: \_\_\_\_\_

Brief Description of Proposed Project: \_\_\_\_\_ Cost of Project: \_\_\_\_\_

Owner/Authorized Name (Print): \_\_\_\_\_ Phone #: \_\_\_\_\_

Owner/Authorized Agent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Notary Signature and Seal \_\_\_\_\_

### OFFICE USE ONLY:

Application #: \_\_\_\_\_ Completed By: \_\_\_\_\_ Date: \_\_\_\_\_

Paid By: ☐ Cash ☐ Check #: \_\_\_\_\_ ☐ Credit Card #: \_\_\_\_\_

Comments: \_\_\_\_\_

☐ **REGISTRATION COMPLETE** (You may now proceed with your project. Please save a copy of this completed Registration Form for your Records)